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ICANotes
Behavioral Health EHR

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Back

< prev

next >

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SOS
610 N. Silver St
Silver City, NM 88061
575-958-6131
575-958-6947

Medicaid ID: YIF915103969

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Set Date/Time
7/30/2023
2:17 PM

Armendariz Barela, Eva
ID: 1000010729151 DOB: 6/19/1972
Case Management Note (SOS)

Presenting Problem:
Adjustment disorder.
Eva continues to experience anxiety.
Symptoms of depression continue to be described.

Recent History:
Client has a history of chronic homelessness, unemployment, substance abuse, anxiety, depression, PTSD, and impairment in the functional domains of independent living, working, and recreation.

Social Support Changes:
No changes in her family or social support network have occurred.

Intervention:
Client was assisted with hygienic necessities today, client was also assisted with with accessing the laundry room so she may find clean clothes and maintain proper self care.

Assessment:
Eva appears flat, minimally communicative, She exhibits speech that is normal in rate, volume, and articulation and is coherent and spontaneous. Language skills are intact. Mood cannot be assessed. There are no signs of hyperactive or attentional difficulties. Eva made poor eye contact during the examination.

Plan:
Continue accommodating client to the best of shelter abilities and prompt client to participate in programming plans.

Diagnosis: Post-traumatic stress disorder, chronic, F43.12 (ICD-10) (Active)
Adjustment disorder with mixed anxiety and depressed mood, F43.23 (ICD-10) (Active)

History of Risk Factors:
*History of Abuse:
Physical abuse
*History of Alcohol or Substance Abuse

Current Risk Factors:
*Absent or Weak Support System:
*Experiencing Severe Anxiety or Panic
*Severe Financial Difficulty
*Feelings of Hopelessness, Worthlessness, or Guilt are Present
Affect Flat or Blunted
*Rapid Shifts in Mood are Occurring

Service Location

Audit Log

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